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INTELLECTUAL PROPERTY LAW

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FACSIMILE COVER SHEET

March 2, 2006

Receiver: U.S. Patent and Trademark Office

TEL #:

FAX #: (571) 273-8300

Sender: Susan W. Xu for Ramin Mahboubian

Our Ref. No.: SUN1P843

Re: Application No. 09/939,315

Pages Including Cover Sheet(s): (13)

MESSAGE:

Dear Sir:

Please file the attached Request for Continued Examination (RCE), Amendment C Transmittal and Amendment C for the above referenced application.

CONFIDENTIALITY NOTE

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Stepan Sokolov

Attorney Docket No.: SUN1P843/P6724

Application No.: 09/939,315

Examiner: Wood, William B.

Filed: August 24, 2001

Group: 2193

Title: JAVA BYTECODE INSTRUCTION FOR
RETRIEVING STRING REPRESENTATIONS
OF JAVA OBJECTS

Confirmation No. 2845

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by
facsimile to fax number 571-273-8300 of the U.S. Patent and
Trademark Office on March 2, 2006.

Signed: _____

Susan W. Xu

AMENDMENT C TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	15	MINUS	20	00	x 25 =	x 50 = 00
Independent Claims	04	MINUS	04	00	x 100 =	x 200 = 00
Multiple Dependent Claim Present and Fee Not Previously Paid						
Total					\$	\$00

- ☒ Applicant(s) hereby petition for a 01 month extension(s) of time to respond to the
aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is
determined that such an extension is required, Applicant(s) hereby petition that such an extension
be granted and authorize the Commissioner to charge the required fees for an Extension of Time
under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional
claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the
enclosed response, to Deposit Account No. 500388 (Order No. SUN1P843).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP

R. Mahboubian
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